CbD (Glasgow)

The student is required to complete at least one CbD before the end of block Assessment & Feedback Session. It is the student's responsibility to organise this.

Anonymised data may be used for research, audit or evaluation.

Trainee's Name:

Firstname Lastname

Date*:

14/08/2026

Assessor's Name*:

Assessor's Position*:

-- Please Select --

Assessor's Registration Number:

Assessor's Email*:

Have you been trained in providing feedback?*:

- Yes
- No

Clinical Setting*:

-- Please Select --

Patient problem / diagnosis*:

Focus of Encounter*:

-- Please Select --

Case Complexity*:

- Low
- Middle
- High

Please rate the following areas. All 'Below Expectation' scores must be justified in comments box. U/C if you have not observed the behaviour and feel unable to comment.

Clinical Assessment: (Understood the patient's story / Made a clinical assessment based on the appropriate questioning and examination)*:

- Below Expectations
- Around Expectations
- Above Expectations

- U/C

Investigation and referral: (Discusses the rationale for the investigations and necessary referrals / Understands why diagnostic studies were ordered and performed, including the risks and benefits in relation to the differential diagnosis)*:

- Below Expectations
- Around Expectations
- Above Expectations
- U/C

Treatment: (Discusses the rationale for the treatment, including the risks and benefits)*:

- Below Expectations
- Around Expectations
- Above Expectations
- U/C

Follow-up and future planning: (Discusses the rationale for the formulation of the management plan including follow-up)*:

- Below Expectations
- Around Expectations
- Above Expectations
- U/C

Professionalism: (Discusses how the care of this patient, as recorded, demonstrated respect, compassion, empathy and established trust / Discusses how the patient's needs for comfort, respect and confidentiality were addressed / Discusses how the record demonstrated an ethical approach, and awareness of any relevant legal frameworks)*:

- Below Expectations
- Around Expectations
- Above Expectations
- U/C

Overall Clinical Care: (A global judgement based on the above question areas)*:

- Below Expectations
- Around Expectations
- Above Expectations
- U/C

Student's comments on performance on this occasion:

Assessor's comments on performance on this occasion*:

Please focus on those areas performed well and also identify areas for development.

Mark for Excellence?*:

- Yes
- No

Agreed Actions:

This information is shared with the student and Educational Supervisor.

Contributor Name*:

Contributor Designation / Job Title*:

Contributor Registration Number(s):

Contributor Email Address*: